

THE ANALYSIS ON SYNDROMES INVOLVING COUGH BY
APPLICATION OF SIX CHANNELS SYNDROME
DIFFERENTIATION PATTERN

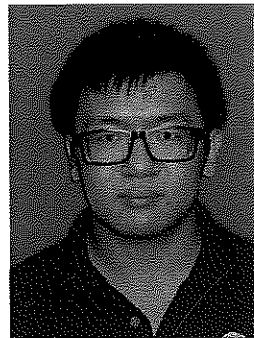
FAZLIE BIN MOHD SANI LIM

DISSERTATION SUBMITTED IN PARTIAL FULFILLMENT OF
THE REQUIREMENTS FOR THE DEGREE OF
BACHELOR OF TRADITIONAL CHINESE MEDICINE (HONS)

JULY 2015

DECLARATION

I hereby declare that project report is based on my original work except quotations and citations which have been duly acknowledged. I also declare that it has not been previously or concurrently submitted for any other degree at INTI International University or other institutions.



A handwritten signature in black ink, written over a horizontal line. The signature is stylized and appears to be 'Fazlie Bin Mohd Sani Lim'.

Fazlie Bin Mohd Sani Lim

I11008949

12 DEC 2015

ACKNOWLEDGEMENT

It had been a tough journey through this 5-year degree program. Looking back at the long road I have been through, I realized that my lecturers and course mates have taught me a very valuable lesson, which is called life. Such a wonderful experience is one that I will treasure for the rest of my life. It is such an honor to be able to write this dissertation in the final year of this program.

Firstly, I would like to express my deepest gratitude to my supervisor, Dr Desmond Cheek Wee Teck, for his utmost dedication of knowledge, wisdom, time as well as his stern protection of the Chinese Medicine knowledge. A million thank you(s) would not be enough for all the advices and suggestions in guiding me throughout this research. His courtesy in guiding me all the way during this research has taught me to work harder for knowledge and wisdom.

Secondly, I would also like to express my appreciation to Ms Ooi Lay Khuan and Ms Sherlly Hoo for all the assistance you have shown me throughout this project. Apart from that, I am also very thankful to all the lecturers who have been really helpful by providing us with their thoughts and experiences generously for this research and dissertation.

Last but not least, I would like to say, thank you so much to all those who have helped me throughout this project, especially my friends and family. I could not have done it without your constant support, kindness and care. Thank you from the bottom of my heart.

ABSTRACT

Objective: Coughs are among the most common symptoms seen during clinical practice. For the purpose of seeking a better treatment methodology for treating syndromes involving cough, the theory of Six Channels Syndrome Differentiation Pattern is studied and applied.

Method: This study will review the Six Channels Syndrome Differentiation Pattern, first introduced by Zhang ZhongJing in his classical work Shang Han Lun of the Han Dynasty. Before dissecting the core theories of Shang Han Lun, other theories that form the backbone of the Six Channels Syndrome Differentiation Pattern will be analyzed, such as the Yin Yang Theory, the Five Elements Theory, the Three Yins and Three Yangs Theory, as well as the Five Cycles and Six Qi Theory. After that, each of the six channels are discussed and appropriate case examples of syndromes involving cough will be included.

Outcome: Syndromes involving cough can generally be categorized into the six channel diseases, where they may occur independently or subsequently. The Six Channel Syndrome Differentiation Pattern collects the many symptoms experienced by the patient and categorize them into the various syndromes in the six channels diseases. From the syndromes, an appropriate treatment principle and prescription formula can be administered for the betterment of the patient's condition. Various diseases will also involve more than one channel.

Conclusion: It is important to perform a thorough syndrome differentiation in order to treat syndromes involving cough and relieve the coughing from the patient. By capturing the symptoms listed in the general outline of each channel, as well as the nature of the disease, an appropriate treatment formula can be prescribed for maximum efficacy.

Key Words: Cough, Six Channels Syndrome Differentiation, Phlegm, Lungs, Diagnosis, Treatment.

TABLE OF CONTENTS

	PAGE
DECLARATION	ii
ACKNOWLEDGEMENTS	iii
ABSTRACT	iv
LIST OF ABBRAVATIONS	vii
PREFACE	viii
CHAPTERS	
1.0 INTRODUCTION	1
2.0 LITERATURE REVIEW	5
3.0 METHODOLOGY	8
4.0 RESULTS	
4.1 The Yin Yang Theory and the Five Elements Theory	9
4.2 The Three Yins and Three Yangs Theory	12
4.3 The Five Cycles and Six Qi Theory	14
4.4 Tai Yang Channel	
4.4.1 Overview	16
4.4.2 Case Example	20
4.4.3 Conclusion	21
4.5 Yang Ming Channel	
4.5.1 Overview	21
4.5.2 Case Example	25
4.5.3 Conclusion	26
4.6 Shao Yang Channel	
4.6.1 Overview	27
4.6.2 Case Example	31
4.6.3 Conclusion	31
4.7 Tai Yin Channel	

4.7.1 Overview	32
4.7.2 Case Example	35
4.7.3 Conclusion	36
4.8 Shao Yin Channel	
4.8.1 Overview	37
4.8.2 Case Example	41
4.8.3 Conclusion	42
4.9 Jue Yin Channel	
4.9.1 Overview	43
4.9.2 Case Example	45
4.9.3 Conclusion	46
5.0 DISCUSSION	48
6.0 CONCLUSION	53
REFERENCES	54

LIST OF ABBREVIATIONS

TCM – Traditional Chinese Medicine

WM – Western Medicine

URTI – Upper Respiratory Tract Infection

PREFACE

Cough is easily one of the most common symptoms when someone is ill. Day in and day out, we can easily hear a cough or two anywhere and anytime. As such, cough can be perceived as one of the symptoms that we will often encounter during clinical practice.

Cough is one of the many symptoms one can get when contracted with an exterior disease, and it is usually the most persisting symptom that can only be ridded off last. There are times where coughs may last for weeks and months, much to the annoyance of the patient.

Cough could easily affect the quality of one's life, for instance, one may not be able to have a good night's sleep when cough irritates them all night long, and this is a common occurrence among the elderly. While cough is often brushed off and most people simply do not seek treatment, coughs are not completely harmless and have been proven to be fatal.

During my brief clinical experiences I had while pursuing the Bachelor Degree in Traditional Chinese Medicine (Hons) in INTI International University, I had personally observed the high prevalence of clinical cases involving cough, among them include small children, developing teenagers, busy-working adults, as well as the elderly.

It is my own personal belief that one of the oldest syndrome differentiation methods would assist me in diagnosing medical cases of cough, and improve my treatment efficacy on them. Eventually, I chose the Six Channels Syndrome Differentiation Pattern, which was introduced by Zhang Zhong Jing (150—219), in his work *Shang Han Lun*.

In this thesis, I will be analyzing cough and the many TCM syndromes that involve it, and categorize them according to the Six Channels Syndrome Differentiation Pattern.

CHAPTER 1

INTRODUCTION

According to WM, a cough is a reflex produced to help clear the breathing passages from irritants, such as dust, microbes and mucus. It often occurs suddenly and repetitively. The cough reflex consists of three phases: an inhalation, a forced exhalation against a closed glottis, and a violent release of air from the lungs following opening of the glottis. (Chung et al, 2008)

According to the textbook Internal Medicine of Traditional Chinese Medicine (中医内科学), cough is defined as the Lungs losing its dispersing and descending function due to an exterior attack or internal injury. The Lung-Qi will flow reversely upwards and strike the trachea, resulting in the patient expelling a sound reminiscence of a cough, which may be accompanied with the expectoration of sputum. (Xiao, 2010)

Cough is one of the most frequent complaints for which patients seek medical attention. Misdiagnosis and mistreatment of cough exist routinely in China. The prevalence of acute cough caused by upper airway infection fluctuates between 9% and 64% in the community, for chronic cough, the prevalence is >10% in most surveys, ranging from 7.2%-33%. (Lai et al. 2013)

Other diseases which feature coughing as its main symptom such as pertussis and pneumonia had been proven to be fatal. Worldwide, there are an estimated 16 million cases of pertussis and about 195,000 deaths per year. (CDC, 2014) Pneumonia is a common illness affecting approximately 450 million people a year and occurring in all parts of the world. It is a major cause of death among all age groups resulting in 4 million deaths (7% of the world's total) yearly. (Ruuskanen et al, 2011) In the United States, as of 2009, pneumonia is the 8th leading cause of death. (Nair et al, 2011)

In Malaysia, Upper Respiratory Tract Infections (URTIs) are the commonest indications for consultation in ambulatory care. The Third National Health and Morbidity Survey conducted in 2006 reported that the incidence of URTI was 18% in all age groups.

The most prevailing associated illness reported was common cold, 16.9%. The highest incidence was among children less than 5 years old, 28.8%. URTI affects daily activities and 60.6% of the population having URTI sought treatment. It has been reported that there is considerable over-prescription of antibiotics and symptomatic therapy for this group of illnesses. Drugs commonly used for symptomatic relief of URTI include antihistamines, nasal decongestants, cough suppressants, expectorants and mucolytics, whether as single-ingredient products or combination preparations. (Tan et al. 2008)

TCM is a study of medicine that is rich in history and culture, it dated back more than two thousand years since its origin from China, and is still widely practiced and spread today. With such a vibrant knowledge behind it, it is my belief that we are able to come up with a solid treatment direction for cough via TCM. From here, I had chosen to study the classic Shang Han Lun 《伤寒论》, and the diagnostic method of Six Channels Syndrome Differentiation Method 六经辨证法 that was first introduced in it.

Shang Han Lun is the brainchild of the medicinal saint Zhang Zhong Jing, in the practice of TCM, it is an infamous work detailing a complete guideline of Principles, Methodology, Prescription and Medicine. Since its inception, many researchers then and now had been intensively researching its articles and treatment methodologies. (Liang et al. 2003)

Shang Han Lun inherited and further developed the TCM theories built from the older classics before it such as Nei Jing 《黄帝内经》, Nan Jing 《难经》, etc. Inspired by the Six Channels Theory first mentioned in Su Wen – Re Lun 《素问·热论》, he created a system which categorizes the complex syndromes caused by externally contracted diseases, as well as developed a pattern detailing the pathogenesis and the development of these syndromes, this system, is known to many as of now as the Six Channels Syndrome Differentiation Pattern.

Shang Han Lun successfully linked the theories of Yin Yang, Organs, Channels, as well as the concepts of etiology, pathogenesis, diagnosis and treatment methodologies found in Nei Jing, forging a more complete and holistic set of theories. Zhang also used

various treatment methods – sweating, vomiting, downwards-purging, harmonizing, warming, clearing, tonifying and reducing when treating diseases. For the onset, development, syndrome differentiation and treatment of exterior-contracted diseases, he made a large contribution in proposing a solid and practical guidelines, serving many future generations of TCM well. (Li, 2010)

Besides using extensive references from Shang Han Lun, I will also quote Huang Di Nei Jing many times in writing this thesis.

Huang Di Nei Jing is among one of the earliest classics of TCM, and is separated to two parts: Su Wen and Ling Su. It established many TCM theories such as the Yin Yang theory, Five Elements theory, Theory of Organs, Theory of Etiology, Theory of Life Cultivation, Theory of Medicinal Therapy, and Theory of Treatment using Channels etc. It also introduced a holistic view to describe medicine, and became the most influential work of TCM, earning the accolade of “the origin of medicine”. (Wang et al, 2014)

While doing this thesis, I was able to return back to the roots of the theories of TCM, such as the Yin Yang Theory and the Five Elements Theory, which eventually lead up to the Six Channels Syndrome Differentiation Pattern, which is the main focus of this thesis.

The general objective of this thesis is to discuss the application of Six Channels Syndrome Differentiation Pattern on syndromes involving cough. Focusing on cough, I wish to understand more about the syndromes that has the involvement of cough.

For the specific objectives, firstly I will review the nature and application direction of Six Channels Syndrome Differentiation Pattern in Shang Han Lun. We should begin by understanding the tools that we have in hand, so that we are able to utilize them with full effect. This applies to the diagnostic method that I am focusing on.

After understanding how the Six Channels Syndrome Differentiation Pattern works, we can move on by associating the syndromes involving cough into it. The pattern generally takes the diseases and splits them into the six channels, each with their own

features and characteristics. I would attempt to capture these aspects and analyze how coughs would become in each of these channels.

Lastly, I would hope to provide a better research foundation for treatment for cough. Up until now, there are still many people who cough relentlessly, hopefully with my research I am able to concoct a better treatment guideline for cough.

For the organization of the thesis, I would firstly begin by further delving into the topic of cough. From there on, we will cover the knowledge base that forms the foundation for Six Channel Syndrome Differentiation Pattern – which are the Yin Yang Theory 阴阳说, Five Elements Theory 五行说, three Yins and three Yangs Theory 三阴三阳说 and the Five Cycles and Six Qi Theory 五运六气说.

After that, we would move on to the six channels themselves, where I will go through the pathogenesis of each channel, as well as their nature, features and characteristics. Syndromes involving cough would then be included and appropriate clinical examples will be provided. Finally, discussions and opinions of my own would be added before we conclude the entire thesis.

CHAPTER 2

LITERATURE REVIEW

In Chinese, cough is translated to “ke sou”. According to Liu HeJian of the Jin Dynasty in his book *Su Wen Bing Ji Qi Yi Bao Ming Ji*, he mentioned that “ke means a cough with sound but without phlegm, it is caused by an injury of the Lungs Qi causing it unable to disperse. Sou is a cough without sound but full of phlegm, it is caused by exuberant dampness in the Spleen. Hence, “ke sou” means a cough with phlegm as well as a sound, with a combined cause of an injured Lungs Qi and dampness-plagued Spleen.” (《素问病机气宜保命集·咳嗽论》：“咳谓无痰而有声，肺气伤而不清也。嗽是无声而有痰，脾湿动而为痰也。咳嗽谓有痰而有声，盖因伤于肺气，动于脾湿，咳而为嗽也。”)

In TCM, cough was first introduced in *Nei Jing*. *Nei Jing* had already covered the topic of cough in a systemic way regarding its etiology, symptoms, pathogenesis and treatment. *Su Wen – Ke Lun* mentioned: “the Five Zang-Organs and Six Fu-Organs all can cause cough, and not just the Lungs.” (《素问·咳论》：“五脏六腑皆令人咳，非独肺也。”) No matter the location etiology of cough, the functional dysfunctions of the Five Zang-Organs and Six Fu-Organs will eventually affect the Lungs and cause cough.

Shang Han Lun then further explained the etiology, pathogenesis and treatment methodologies of cough in detail. It also included a guideline of syndrome differentiation in diagnosis cough. Various herbal prescriptions were recorded in it to treat cough, which is still effective today. (Huang et al, 2012)

Zhu Bing Yuan Hou Lun 《诸病源候论》, written by Chao Yuan Fang 巢元方 during the Sui Dynasty elaborated on the Zang Fu organs cough introduced in *Nei Jing*, as well as covering the clinical syndromes of cough, such as Wind-Cough, Cold-Cough etc.

During the Tang and Song Dynasties, many classics such as Qian Jin Yao Fang 《千金要方》, Wai Tai Mi Yao 《外台秘要》, He Ji Ju Fang 《和剂局方》 etc had collected and introduced many prescriptions in treating cough.

During the Ming Dynasty, Jing Yue Quan Shu 《景岳全书》 had categorized cough into two main sections, externally contracted cough and internally generated cough. Ming Yi Za Zhu 《明医杂著》 mentioned that “in order to treat cough, we must first determine the time of onset as well as the sthenic or asthenic nature of it.” (治法须分新久虚实)

Zhang JingYue 张景岳 of the Ming Dynasty mentioned in his book Jing Yue Quan Shu – Ke Sou 《景岳全书·咳嗽》: “The cause of cough doesn’t exceed the 2 causes. One is externally contracted diseases, another is internal injury.” (以余观之, 则咳嗽之要, 止惟二证。何为二证, 一曰外感, 一曰内伤而尽之矣。) The external pathogens, in TCM, are said to be wind, cold, summer-heat, dampness, dryness and fire, in which when contracted, can cause damage to the Lungs. The Lungs, in TCM, is perceived as a fragile organ very vulnerable to pathogenic attack, it can quickly manifest symptoms at the wake of a pathogenic attack.

All these had benefited the development of cough theory, making it more complete and practical during clinical usage.

The Six Channels Syndrome Differentiation Pattern was first introduced in Shang Han Lun, where Zhang ZhongJing of the Han Dynasty elaborated on the article from Su Wen – Re Lun and collected the pathogenesis characteristics of cold damage diseases, and introduced a new and unique syndrome differentiation method during that time.

In Su Wen – Re Lun, it stated that: “On the first day of cold damage, Tai Yang was affected, hence head and nape pain, stiff back. On the second day, Yang Ming was affected... hence bodily fever, painful eyes, dry nostrils and unable to sleep. On the third day, Shao Yang was affected... hence chest and hypochondriac pain, as well as tinnitus. ... On the fourth day, Tai Yin was affected... hence abdominal fullness and dry throat. On the fifth day, Shao Yin was affected... hence dry mouth and tongue as well as thirst. On the sixth day, Jue Yin was affected... hence irritation and shrunken genitalia.” (“伤寒一日, 巨阳受之, 故头项痛, 腰脊强。二日阳明受之……故

身热目痛而鼻干，不得卧也。三日少阳受之……故胸胁痛而耳聋。四日太阴受之……故腹满而溢干。五日少阴受之……故口燥舌干而渴。六日厥阴受之……故烦满而囊缩。”)

From here, we can see how this had given important influence to Zhang Zhong Jing in developing the Six Channels Syndrome Differentiation Pattern. By utilizing the six channels – Tai Yang, Yang Ming, Shao Yang, Tai Yin, Shao Yin and Jue Yin, we can understand the pathological progression of the channels as well as their associated viscera.